

PART B - FEE(S) TRANSMITTAL

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02/27/2006

MACPHERSON KWOK CHEN & HEID LLP
 1762 TECHNOLOGY DRIVE, SUITE 226
 SAN JOSE, CA 95110

05/19/2006 RMEBRAH1 00000006 502257 10772932

01 FC:1501 1400.00 DA
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Michael Shenker	(Depositor's name)
<i>Michael Shenker</i>	(Signature)
May 12, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/772,932	02/04/2004	Chunchieh Huang	M-15327 US	6068

TITLE OF INVENTION: USE OF MULTIPLE ETCHING STEPS TO REDUCE LATERAL ETCH UNDERCUT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	05/30/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
LUU, CHUONG A	2818	438-717000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Michael Shenker**

2 **MacPherson Kwok Chen & Heid LLP**

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

PROMOS Technologies Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hsin Chu City, Taiwan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 4

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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2257 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Michael Shenker

Date May 12, 2006

Typed or printed name Michael Shenker

Registration No. 34,250

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